PAGE 1/ 3

Division of Corporations Public Access System

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Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I20000000195 Phone : (850)521-1000 Fax Number : (850)558-1575 SECRETARY OF STATE

# LIMITED LIABILITY COMPANY

RENLOR, LLC

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#### ARTICLES OF ORGANIZATION FOR

### RENLOR, LLC. A LIMITED LIABILITY COMPANY

### ARTICLE I-NAME

The name of the Company shall be: RENLOR LLC

#### ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing address of this limited liability company shall be:

16473 NE 33<sup>-4</sup> Avenue North Mismi Beach, FL 33160

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The name and address of the initial regimered agent is:

RACHEL BAUM
16473 NE 33<sup>rd</sup> Avenue
North Miami Beach, FL 33160

## ARTICLE IV - MANAGEMENT

The Limited Liability Company is to managed by one manager or more managers and is therefore, a manager - managed company.

Names:

RACHEL BAUM 16473 NE 33<sup>rd</sup> Avenue

North Miami Beach, FL 33160

TACTE BAIN

PAGE 3/3

H03000341249 3

# CERTIFICATE OF DESIGNATION REGISTERED AGENT/DEGISTERED OFFICE

Pursuant to the provisions of section 608, Floride Statutes, the undersigned Limited Liability Company, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

The name and address of the registered agent and office is:

RACHEL BAUM 16473 NE 33<sup>rd</sup> Avenue North Miami Beach, FL 33160

SIGNATURE

RACHEL BAUM

TITLE manager

DATE 12/23/03

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SECRETARY STORIUS
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HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED COMPANY AT THE PLACE DESIGNATED IN THIS CERTIFICATE. I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE